

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S): _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2						
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9	1					
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15	1					
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TOTAL IND.	2		↓		↓	↓
TOTAL DEP.	13	←	←	←	←	←
TOTAL CLAIMS	15	██████████	██████████	██████████	██████████	██████████

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.		←	←	←	←	←
TOTAL CLAIMS		██████████	██████████	██████████	██████████	██████████

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS